GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

STARRED QUESTION NO:109
ANSWERED ON:05.03.2008
RISE IN MALARIA CHIKUNGUNYA AND DENGUE CASES
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the number of cases of Malaria, Chikungunya, Dengue and Viral fever is increasing in the country;

(b) if so, the details thereof and the reasons therefor;

(c) the number of cases reported and the number of persons died due to these diseases during the last three years and in the current year, State-wise;

(d) whether any study has been conducted regarding the cause of increase in the number of cases of deaths due to these diseases; and

(e) if so, the outcome thereof?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS)

(a)to(e): A statement is laid on the Table of the House.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 109 FOR 5TH MARCH, 2008

The situation of vector borne diseases like Malaria, Chikungunya, Dengue and Viral Fever (Acute Encephalitis Syndrome/JE) in the country are indicated below:

Year	Malaria	Chikungunya	Dengue	AES/JE
2001	2085484	No case was reported	3306	2061
2002	1841229	1926	1765	-
2003	1869403	12754	2568	-
2004	1915363	4153	1714	-
2005	1816569	11985	6727	-
2006	1780777	1390322	12317	2842
2007 (upto Dec.,07)	1363279	56355	5395	4042

The above data reported by the States indicates the declining trend in case of Malaria in the country. However, increase in malaria cases has been noticed in Chhatisgarh, Goa, Maharashtra, Meghalaya, Nagaland and Andaman & Nicobar Islands. The viral diseases such as Dengue, Chikungunya and JE are seasonal and epidemic prone. Chikungunya and Dengue have shown less number of cases in 2007 as compared to the previous year. However, in case of JE the fluctuations are noticed every year. In 2007, more number of cases are recorded as the total cases recorded are for Acute Encephalitis Syndrome (AES) including JE cases.

The disease-wise and state-wise situation of number of cases and number of persons died during the last three years for Malaria, Chikungunya, Dengue and JE are enclosed at Annexure-I to IV.

Regular surveillance and monitoring of disease trend is being conducted in the periphery and the containment measures are taken accordingly. However, since the decline has been noted in malaria cases as indicated above, no separate study has been instituted. Following strategies are being implemented in the country to check the spread of these diseases:

1. Disease Management

- Early case detection and complete treatment.
- Strengthening of referral Services
- Epidemic preparedness and rapid response

2. Integrated Vector Management

- Indoor residual spraying in selected high risk areas.
- Use of insecticide treated bednets
- Use of larvivorous fish
- Anti larval measures in urban areas including biolarvicides.

3. Supporting Intervention

- Behaviour change communications
- Public private partnership & inter-sectoral convergence
- Human resource development through capacity building
- Operational Research including studies on drug resistance and insecticide susceptibility.
- Monitoring and evaluation through periodic reviews field visits and web based Management information system.

In addition to the above, Government has taken following initiatives for prevention and control of Japanese Encephalitis:

- Strengthening of AES/JE surveillance through 50 sentinel sites and 12 Apex Referral Laboratories.

- Standard Guidelines for AES/JE surveillance circulated

- "Vector Borne Diseases Control Surveillance Unit" set up at BRD Medical College, Gorakhpur, UP

- Sub office, ROH &FW, Lucknow set up in Gorakhpur

- JE vaccination in age group 1-15 years started in 2006 in 11 districts in 4 states (Assam, Karnataka, Uttar Pradesh, West Bengal). In 2007- Expanded to 28 districts in 10 states (Assam, Karnataka, Uttar Pradesh, West Bengal and Haryana, Bihar, Andhra Pradesh, Tamil Nadu, Maharashtra, Kerala).

- Training of Microbiologists and Technicians of sentinel centres have been conducted.

- Training courses for Clinicians and Nurses for Uttar Pradesh & Assam States conducted to improve the skills in JE case management.

- Constitutions of Rapid Response Teams.

Similarly for prevention and control of Dengue/Chikungunya, following additional initiatives have been taken by Government :

- Long term action plan for early case detection, disease management, vector surveillance, use of adulticides and larvicides were circulated to states for prevention and control activities

- Guidelines on clinical management of Dengue/DHF cases sent to the states for wider circulation.

- Identified 13 Apex Referral Laboratories for advanced diagnosis and regular surveillance of Dengue and Chikungunya cases.

- Identified 110 sentinel surveillance hospitals for proactive surveillance for Dengue and Chikungunya.

- IgM − Mc ELISA test kits for detection of Dengue/Chikungunya supplied to Apex Referral Laboratories and Sentinel Surveillance hospitals.

- Contingency grant released to meet the operational cost of the Sentinel Surveillance hospitals and Apex Referral Laboratories.

- Intensified IEC/BCC activities